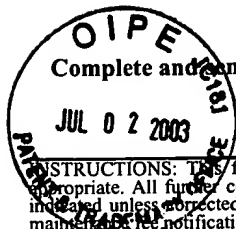


## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**  
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7590

04/03/2003

Perkins Coie LLP  
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Lynnea B. Anderson (Depositor's name)  
 Lynnea B. Anderson (Signature)  
 July 2, 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/642,607	08/17/2000	Randy M. McCormick		6932

TITLE OF INVENTION: CAPILLARY ELECTROKINESIS BASED CELLULAR ASSAYS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$650	\$0	\$650	07/03/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
BROWN, JENNINE M	1755	204-601000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Jacqueline F. Mahoney  
 2. Judy M. Mohr  
 3. Perkins Coie LLP

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ACLARA BioSciences, Inc. Mountain View, California, US

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

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Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Jacqueline F. Mahoney

July 2, 2003

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